Attorney or Party Name, Address, Phone, Fax, Email:			For court use only	
			DO NOT FILE	
UNITED STATES BANKRUPTCY COURT DISTRICT OF HAWAII			Case No.:	
In re:			Chapter:	
		Debtor(s).		
NOT	ICE OF CODDE	CTED COCIAI (	SECUDITY NUMBER	
NOT	ICE OF CORRE	CIED SOCIAL S	SECURITY NUMBER	
		•	provided ONLY to creditors and certain other	
•			Jnited States Trustee, and the other entities noted Meeting of Creditors, & Deadlines in your case.	
			vice showing to whom you have sent this notice	
			·	
NOTICE IS HEREB	Y GIVEN:			
The Social Se	curity Number of	he Debtor or Join	t Debtor originally provided to the court for	
	cy case, meeting o	f creditors, and ce	ertain deadlines was incorrect. The correct	
information is stated below.				
Debtor:				
	Name		Full (9-digit) Social Security Number	
or				
Joint Debtor:				
	Name		Full (9-digit) Social Security Number	
Date:				
		Print	Name:	
*The Office of the United States T	rustee also mandates t	hat the correction be s	sent to the major credit reporting agencies:	
Equifax			Experian	
Dispute Department		stomer Relations  D. Box 2000	Profile Maintenance P.O. Box 9558	
P.O. Box 740243 Atlanta, GA 30374		ester, PA 19022	P.O. Box 9558 Allen, TX 75013	